				PTO 88		
UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.	000202	Total Pages	58 U.S		
(Only for new nonprovisional applications under 37 CFR 1.53(b))	First Named Inventor or Application Identifier					
	Kenji SHIMOYAMA, Nobuyuki HOSOI, Kazumasa KIYOMI, Yoshi nito SATO and Satosi KIKUCHI					
Check Box, if applicable [XX] Duplicate	Express Mail Label No.					
APPLICATION ELEMENTS FOR: SEMICONDUCTOR OPTICAL DEVICE APPARATUS	ADDRESS TO:	Assistant Comm BOX PATENT Washington, D.	APPLICATI(			
[XX] Fee Transmittal Form (Incorporated within this for (Submit an original and a duplicate for fee process)	, ,	e is deferred).	*****			
2. [XX] Specification Total Pages [46]						
3. [XX] Drawing(s) (35 USC 113) Total Sheets [6]						
4. [ ] Oath or Declaration Total Pages [ ] (Not attached; deferred under P. L. 97-247.						
a. [ ] Newly executed (original or copy)						
b. [ ] Copy from prior application (37 CFR 1.63(d) (for continuation/divisional with Box 17 completed).						
<ul> <li>i. [ ] <u>Deletion of Inventor(s)</u></li> <li>Signed statement attached deleting inventor(s) named see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul>	in prior application,					
5. [ ] Incorporation by reference (useable if box 4b is checked)  The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under box 4b, is considered as being part of the disclosure of the accompanying application and is incorporated by reference therein.						
6. [ ] Microfiche Computer Program (Appendix)						
7. [ ] Nucleotide and/or Amino Acid Sequence Submission	n (if applicable, all	necessary)				
<ul><li>a. [ ] Computer Readable Copy</li><li>b. [ ] Paper Copy (identical to computer copy)</li><li>c. [ ] Statement Verifying identity of above copies</li></ul>						
ACCOMPANYING APPLICATION PARTS						
8. [ ] Assignment Papers (cover sheet and document(s))						
9. [ ] 37 CFR 3.73(b) Statement (when there is an assignee) [ ] Power of Attorney						

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[ ] English translation Document (if ap	photoio	Copies of IDS Citation	ons	
. [ ] Information Disclosure Statement	[]	Copies of 1D3 Chaire	,, <u></u>	
. [ ] Preliminary Amendment				
3. [XX] Return Receipt Postcard (MPEP	503)	at 1th major 0	onlication	
4. [ ] Small Entity Statement(s)	[ ]Statement filed in prior application Status still proper and desired.			
<ul> <li>5. [] Claim for Convention Priority</li> <li>a. Priority of application no's certified copies/copy have/has been for Continuing Applications, if applicable).</li> <li>16. [] Other</li> </ul>	filed on filed in prior application	ertified copy of Priorit	laimed under 35 USC	2119. The
f 1 Other				
<ul><li>16. [] Other</li></ul>	L check appropriate	box and supply the repart (CIP) of prior ap	equisite information	
TO A TION	L check appropriate	box and supply the repart (CIP) of prior ap	equisite information oplication no Rate	Basic Fee \$690.00
17. If a CONTINUING APPLICATION [ ] Continuation [ ] Division [	N, check appropriate  Continuation-in-p  Number Filed	Number Extra	урпоштот —	Basic Fee
17. If a CONTINUING APPLICATION  [ ] Continuation [ ] Division [ FEE TRANSMITTAL	N, check appropriate  Continuation-in-p  Number Filed  53 - 20	part (CIP) of prior ap	Rate	Basic Fee \$690.00
17. If a CONTINUING APPLICATION  [ ] Continuation [ ] Division [ FEE TRANSMITTAL  The filing fee is calculated below  Total Claims  Independent Claims	N, check appropriate  Continuation-in-p  Number Filed	Number Extra	Rate x \$18.00	Basic Fee \$690.00
17. If a CONTINUING APPLICATION  [ ] Continuation [ ] Division [ FEE TRANSMITTAL  The filing fee is calculated below  Total Claims	N, check appropriate  Continuation-in-p  Number Filed  53 - 20	Number Extra  33 0	Rate  x \$18.00 x \$78.00	Basic Fee \$690.00
17. If a CONTINUING APPLICATION  [ ] Continuation [ ] Division [ FEE TRANSMITTAL  The filing fee is calculated below  Total Claims  Independent Claims  Multiple Dependent Claims	N, check appropriate  Continuation-in-p  Number Filed  53 - 20	Number Extra  33 0	Rate  x \$18.00  x \$78.00  \$260.00	Basic Fee \$690.00 594.00
17. If a CONTINUING APPLICATION  [ ] Continuation [ ] Division [ FEE TRANSMITTAL  The filing fee is calculated below  Total Claims  Independent Claims	N, check appropriate Continuation-in-p Number Filed  53 - 20  1 - 3	Number Extra  33 0	Rate  x \$18.00  x \$78.00  \$260.00	Basic Fee \$690.00 594.00

[XX] NO FEE ENCLOSED. THE FILING FEE IS DEFERRED.

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[]	A check in the amount of _\$ is enclosed to cover the filing fee of _\$ and the assignment recordation fee of _\$
[]	Please charge our Deposit Account No. 01-2340 in the total amount of to cover the filing fee and the assignment recordation fee. A duplicate of this sheet is attached.
[]	The Commissioner is hereby authorized to charge payment for any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Deposit Account No. <b>01-2340</b> . A duplicate of this sheet is attached.
18.	CORRESPONDENCE ADDRESS
	ARMSTRONG, WESTERMAN, HATTORI McLELAND & NAUGHTON 1725 K Street, N.W. Suite 1000 Washington, D.C. 20006 Telephone: (202) 659-2930 Facsimile: (202) 887-0357
SUBM	IITTED BY
Typed	or Printed Name William G. Kratz, Jr. Reg. No. 22,631
Signat	Date: February 23, 2000

WGK/llf